PTO/SB/21 (08-03)

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Under the Paperwork Reduction Act of 1999, Ite	persons are require	Application Number	09/489,192	RECEIV
TRANSMITTAL FORM		Filing Date	1/20/2000	CENTRAL FAX
		First Named Inventor	Scott A. Field	CENTRAL FAX
PORIVI		Group Art Unit	2136	
(to be used for all correspondence after inli	lal filing)	Examiner Name	PRAMILA PARTHAS	ARATHY
		Attorney Docket Number	MS1-407US	
Total Number of Pages in This Submission		RES (check all that apply)		
Fee Transmittal Form Fee Attached Amendment / Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Documents Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Drawii Licens Petitic Petitic Provis Chang Addre Termi	ng(s) sing-related Papers on on to Convert to a sional Application or of Attorney, Revocation ge of Correspondence	After Allow to Group Appeal Co of Appeal Co (Appeal No Proprietan) Status Let	closure(s) (please
SIGNA	TURE OF APPI	LICANT, ATTORNEY, O	R AGENT	
Firm Dr Lance R. Sadler, R ndividual Name	eg. No. 38605			
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hereby certify that this correspondence is be with sufficient postage as first class mail in an 1450 on the date shown below.	ing facsimile tran envelope addres	smitted to the USPTO or de used to: Commissioner for P	posited with the United atents, P.O. Box 1450, A	States Postal Service Alexandria, VA 22313-
E and an added name				
Typed or printed name Carly Taylor				

PLL

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PTOISB/17 (12-04)
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Effective on 12/08/2004.		Complete if Known					
Fees cursuant to the Consolidated Appropriations Act, 2005 (H.R. 48	 Annicanon Number 	Application Number 09/489,192					
FEE TRANSMITTA	Filing Date	1/20/2000					
For FY 2005	First Named Invento	Scott A. Fleld	Scott A. Fleld				
Applicant plains and grate status. Con 27 CCD 1 27	Examiner Name	PRAMILA PARTHAS	SARATH				
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2136					
TOTAL AMOUNT OF PAYMENT (\$) 0.00	Attorney Docket No.	MS1 -407US					
METHOD OF PAYMENT (check all that apply)							
Chcck Credit Card Money Order	Check Credit Card Money Order None Other (please identify):						
Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC							
For the above-identified deposit account, the Director	is hereby authorized to: (ch						
✓ Charge fee(s) indicated below	Charge fee	e(s) indicated below, excep	t for the filing fee				
Charge any additional fee(s) or underpayments		overpayments	•				
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit ca		• •	de credit card				
Information and authorization on PTO-2038.			<u> </u>				
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FE FILING FEES		AMINATION FEES					
Small Entity	Small Entity	Small Entity	For Dold (9)				
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		130 65					
1		160 80 500 300					
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2. EXCESS CLAIM FEES	U U	U U	Small Entity				
Fee Description			Fee (\$) Fee (\$)				
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100							
Multiple dependent claims	naopenaem viami more i	um n. mo ougust pare.	360 180				
Total Claims Extra Claims Fee (\$)	Fee Paid (\$) Mu	itiple Dependent Claims					
-20 or HP = x 50 = HP = highest number of total claims poid for, if greater than 20		Fee (\$) Fee Paid	<u>(\$)</u>				
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= 3 or HP = x 200 = HP = highest number of Independent claims paid for, if greater than 3	<u> </u>						
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)							
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
Total Sheets							
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other:							
SUBMITTED BY							
Signature	Registration No. 386	Telephone (509) 324-9256				
Name (Print/Type) Lance R. Sadle	1 Armanay/Adam)		2/6/				

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No. Filing Date Inventor Applicant Examiner	Microsoft Corporation				
Art Unit	2136 MS1-407us				
RESPONSE TO OFFICE ACTION DATED JANUARY 5, 2005.					
To: Commissioner for Patents P.O. Box 1450	•				

From:

Lance Sadler (Tel. 509-324-9256, ext 226; Fax 509-323-8979)

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